



107-31-3

User not listed

#1772

Please type a plus sign (+) inside this box → +

Approved for use through 10/31/2002. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/828,572
Filing Date	April 6, 2001
First Named Inventor	Takasha Ueno
Group Art Unit	1772
Examiner Name	S. Hon
Attorney Docket Number	2397-4786US

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Postcard receipt acknowledgment (attached to the front of this transmittal) <input checked="" type="checkbox"/> Duplicate copy of this transmittal sheet in the event that additional filing fees are required under 37 C.F.R. § 1.16 <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Response to Restriction Requirement/Election of Species Requirement dated <input checked="" type="checkbox"/> Amendment in response to office action dated March 31, 2003 <input type="checkbox"/> Amendment under 37 C.F.R. § 1.116 in response to final office action dated <input type="checkbox"/> Additional claims fee - Check No. in the amount of \$ <input type="checkbox"/> Letter to Chief Draftsman and copy of FIGS. with changes made in red <input type="checkbox"/> Transmittal of Formal Drawings <input type="checkbox"/> Formal Drawings ( sheets)	<input type="checkbox"/> Information Disclosure Statement, PTO/SB/08A (08-00); <input type="checkbox"/> copy of cited references <input type="checkbox"/> Supplemental Information Disclosure Statement; PTO/SB/08A (08-00); copy of cited references and Check No. in the amount of \$180.00 <input type="checkbox"/> Associate Power of Attorney <input checked="" type="checkbox"/> Petition for Extension of Time and amount of \$55 to be charged to Deposit Account 20-1469. <input type="checkbox"/> Petition <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Other Enclosure(s) (please identify below):
	<input type="checkbox"/> Remarks <p>The Commissioner is authorized to charge any additional fees required but not submitted with any document or request requiring fee payment under 37 C.F.R. §§ 1.16 and 1.17 to Deposit Account 20-1469 during pendency of this application.</p>	

**RECEIVED**  
AUG 08 2003  
**GROUP 1700**

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

10/15/2003 D  
03 FC:2251

Firm or Individual name D/L/T/D 00000001 201160 Signature 55.00 DA	Laurence B. Bond 09828572	Registration No. 30,549
Date	July 30, 2003	

## CERTIFICATE OF MAILING

Express Mail Label Number: EV348044247US

Date of Deposit: July 30, 2003

Person Making Deposit: Laurence B. Bond